

## **BOROUGH OF BEACH HAVEN**

Special Events, Block Parties Policies and Application

300 Engleside Avenue, Beach Haven, NJ 08008 (609) 492-0111 Fax (609) 492-6262

Thank you for your interest in holding a special event or block party in the Borough of Beach Haven. This application is needed for special events that are open to the public or a Residential Block Party. Attached are the items needed to be obtained, prior to the approval of your upcoming event. Please follow the application directions carefully.

#### **Requirements and Conditions**

- 1. Any person wishing to hold a special event or block party shall file an application and the required fees with the Borough Clerk at least *14 days prior* to the date of the event.
- 2. The application will be reviewed by the appropriate agencies including Police, Fire, Public Works, Land Use and others as determined.
- \*Traffic & crowd control determinations will be made at the discretion of the Chief of Police or their designee. If it is determined that your event needs either, additional fees will apply. The cost of traffic and crowd control must be paid prior to your event. If additional police are needed beyond that anticipated, you will be invoiced the difference.
- 3. The applicant shall comply with all applicable Borough ordinances, codes, conditions and requirements.
- 4. Requests for Fire and Emergency Services shall be subject to requirements and interpretive authority and discretion of the Borough.
- 5. Requests for Police services shall be subject to the interpretive authority and discretion of the Beach Haven Police Department and separate fees may apply.
- 6. Applicants for Special Events must provide a certificate of General Liability Insurance with the minimum combined single limit liability per occurrence for bodily injury and property

damage of one million (\$1,000,000) dollars with a minimum annual aggregate of two million (\$2,000,000) dollars. The Borough may require "Liquor Liability or Host Liquor Liability" coverage be provided by the applicant. For certain uses, "Spectators", "Athletic Participants" and/or "Sports Accident" coverage may be required to be maintained by the user.

- 7. Applicants for all events must provide a completed Hold Harmless Agreement indemnifying the Borough of Beach Haven.
- 8. No residential block party shall be conducted in such manner as to interfere with the safe passage of emergency vehicles and shall not continue for more than four (4) hours.
- 9. Any banner used for your approved event can only be displayed on the Borough tennis court fence during your event.

\*\*\*DATES WILL NOT BE RESERVED UNTIL EVERY ITEM REQUIRED IS RETURNED. THAT INCLUDES ALL PAPERWORK AND FEES ASSOCIATED WITH THE EVENT.

#### **FEES**

#### **Application Fees**

\$50.00 Non-Profit Organizations: Civic, Religious or Educational Organizations must submit a

\$50.00 non-refundable application fee per applicant/organization per calendar year.

\$300.00 For-Profit Organizations: Must submit a \$300.00 non-refundable registration fee per

applicant/per calendar year.

\$50.00 Residential Block Party

#### Park Bond/Security Deposit

#### \$200.00

All applicants requesting use of Borough property must post a \$200.00 security deposit per event to offset any additional costs incurred by the Borough of Public Works Department, after the event, restoring the area to its previous condition. The balance of the deposit shall be refundable AFTER deducting the costs of necessary restoration expenses incurred. Billing shall be on a time-and-material basis. Applicant must request, in writing, the return of their posted park bond within 30 days of the close of the calendar year in which the event was held. Damages beyond \$200.00 will be invoiced to the event coordinator.

Block party applicants are not required to post a bond.

\*\*\*CRAFT FAIRS AND FLEA MARKETS SHALL POST A BOND PER EVENT OR OCCURANCE\*\*\*

## Fees for Lining of a Field

#### \$468.00

Any applicant seeking to hold a craft fair or flea market type of event requiring the event site to be lined by the Borough Department of Public Works shall be charged a fee, per event, as determined by resolution annually by the governing body.

#### **Dumpster Fees**

#### \$150.00

If the event requires a dumpster, said dumpster shall be obtained **only** from the Pubic Works Department, for a price competitive rate comparable to commercial dumpster providers. The price shall be fixed annually by resolution of the governing body. <u>Any event requiring a dumpster will receive a recycling dumpster free of charge.</u>

# APPLICANT AND SPONSORING ORGANIZATION INFORMATION

Please complete. ALL data MUST be provided.

NAME OF ORGANIZATION (if applicable)\_\_\_\_\_ Is this organization registered with the State of New Jersey as a non-profit organization? YES NO APPLICANT NAME :\_\_\_\_\_ ADDRESS: CITY STATE ZIP CODE\_\_\_\_\_ DAYTIME PHONE ( ) \_\_\_\_\_ EVENING PHONE ( ) FAX ( ) \_\_\_\_\_ EMAIL: \_\_\_\_\_ CONTACT PERSON DAY OF EVENT (MUST BE ON-SITE) CELL PHONE ( )\_\_\_\_\_ Please submit changes in the above information to the Clerk's Office immediately. SPECIAL EVENT INFORMATION TYPE OF EVENT RUN/WALK CONCERTS BLOCK PARTY SPORTS CAMP FAIR OTHER EVENT TITLE \_\_\_\_\_ ESTIMATED # OF PARTICIPANTS \_\_\_\_\_ ESTIMATED # IN ATTENDANCE\_\_\_\_

| WILL ALCOHOL BE SERVED AT THIS EVENT? YES O         |
|---|
| REQUESTED LOCATION:                                 |
| TAYLOR AVE PARK (BEHIND BAY VILLAGE)                |
| WALSH FIELD (NEXT TO TENNIS COURTS ON PEARL STREET) |
| VETERAN'S MEMORIAL PARK (BETWEEN ENGLESIDE/AMBER)   |
| NELSON AVE PARK                                     |
| BEACH   |
| OTHER LOCATION                                      |
|   |
| EVENT DATE (S)                                      |
| RAIN DATE (S)                                       |
| NO WAVE DATE (S)                                    |
|   |
| TIMES:  |
| SET-UP START TIME AM/PM SET-UP END TIME AM/PM       |
|   |
| EVENT START TIME AM/PM                              |
| EVENT FINISH TIME AM/PM                             |
|   |
| TAKE DOWN TIMEAM/PM TOAM/PM                         |
| GENERAL EVENT INFORMATION                           |
| Is this a fundraiser? Yes No                        |
| 15 this a fundraiser! Tes NU                        |

| Beneficiary   |
|---|
| Registration or Entrance Fee? Yes Amount \$ No  |
| Supplying your own First-Aid station? Yes No  |
| Food concession and/or food preparation area (s)? Yes No  |
| If YES, what type of fuel source?   |
| Gas Electric Charcoal Propane Other   |
|   |
| Will tents be utilized for this event? Yes No   |
| If YES, what size? How many?  |
| Name of Tent Company?   |
| You MUST acquire a SEPARATE Tent Permit through the Licensing Department:   |
| Donna Marie 609-492-0111 ext. 221 or Licensing@beachhaven-nj.gov  |
|   |
|   |
| Scaffolding, bleachers, grandstands, platforms? Yes No  |
| Scaffolding, bleachers, grandstands, platforms? Yes No No Will a stage be utilized? Yes No  |
|   |
| Will a stage be utilized? Yes No  |
| Will a stage be utilized? Yes No  |
| Will a stage be utilized? Yes No No If YES, what are the dimensions of the stage?   |
| Will a stage be utilized? Yes No Service No Service No No Service |
| Will a stage be utilized? Yes No Service No Service No No Service |
| Will a stage be utilized? Yes No No Will there be entertainment? Yes No No If YES, what type?   |
| Will a stage be utilized? Yes No No Will there be entertainment? Yes No No Are vehicle(s) and/or trailers to be used? Yes No  |

| If YES, how many of each? tables chairs   |
|---|
| Will fencing, barriers, and/or barricades be utilized? Yes No No  |
| Does your event require electricity? Yes No   |
| If YES, source of electricity?  |
| Dimension of area need? If known  |
| Are street closures requested? Yes No   |
| If YES, what streets?   |
| Reason for street closure?  |
| The need for Traffic Control or Crowd Control will be determined<br>by the Chief of Police or their designee. If necessary, there are<br>additional fees associated with this service.                |
| Will there be portable toilets? Yes No Supplier?  |
| Are inflatable devices being used? Amusements? Yes No If YES, please list:  |
| Supplier:   |
| Booth(s), Exhibit(s), Display(s) and/or Enclosure(s)? Yes No Banner(s)? Yes No Will the event be advertised? Yes No How?  What is your plan for cleaning and disposing of ALL refuse from this event? |
|   |

## **REQUIRED ATTACHMENTS**

#### 1. PROOF OF INSURANCE (Special Events Applicants Only)

Evidence of insurance will be required with application. Applicants must provide a certificate of General Liability Insurance name the Borough as additional insured including Products & Completed Operations Insurance with a minimum combined single limit of liability per occurrence for bodily injury and property damage of one million (\$1,000,000) dollars with a minimum annual aggregate of two million (\$2,000,000) dollars. The Borough may require "Liquor Liability or Host Liquor Liability" coverage be provided by the applicant. For certain uses, "Spectators", Athletic Participants" and/or "Sports Accident" coverage may be required to be maintained by the user.

### 2. HOLD HARMLESS INDEMNIFICATION AGREEMENT (All Applicants)

An executed Hold Harmless Indemnification Agreement must be submitted with each application.

#### 3. IMPACTED PROPERTY OWNER'S LIST

#### For Residential Block Party Applicant's Only:

The names, signatures, addresses, telephone numbers, blocks and lots of property owners impacted where block party is proposed. All signatures shall indicate consent to the proposed block party, consent to the proposed street closure, and acknowledgement that all residents and their invitees shall adhere to all applicable laws, regulations and ordinances, including, but not limited to noise ordinance.

All residents involved must complete and fill out a:

HOLD HARMLESS INDEMNIFICATION AGREEMENT FOR BLOCK PARTIES

#### 4. AFFIDAVIT OF APPLICATION

APPLICANT'S

Everything that I have stated on this application is correct to the best of my knowledge. I have read, understand, and agree to abide by the policies and rules and regulations listed on this form as they pertain to the requested usage. By signing this application, the applicant agrees to follow all rules and regulations of Chapter 140 of the Borough Code. All programs and facilities of the Borough of Beach Haven are open to all citizens regardless of race, sex, color, religion, national origin or handicap.

| NAME                | SIGNAT | TURE            | DATE |
|---------------------|--------|-----------------|------|
|                     |        |                 |      |
|                     |        |                 |      |
|                     |        |                 |      |
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|                     |        |                 |      |
|                     |        |                 |      |
|                     |        |                 |      |
|                     |        |                 |      |
| For Office Use Only |        |                 |      |
| Approved            | Denied |                 | Date |
|                     |        | Chief of Police |      |
|                     |        |                 |      |
| Approved            | Denied |                 | Date |
|                     |        | Borough Manager |      |

# **Hold Harmless Indemnification Agreement**

| 11  | h Haven, hereinafter referred to as "I  |  |  |  |  |
|---|---|--|--|--|--|
| Organization) hereinafter referred to as "User", to use the facilities listed below:  |   |  |  |  |  |
| Name and Location of Facility(ies):   |   |  |  |  |  |
| hereinafter referred to   | as "Facility(ies)" for  |  |  |  |  |
|   | (State the Purpose)   |  |  |  |  |
|   | s):nspect the described <b>Facility(ies)</b> pricazardous or dangerous conditions for   | •  |  |  |  |
|   | George Gilbert 609-492-2525 at Mu   | nicipality, and  |  |  |  |
| dangerous conditions a  |   |  |  |  |  |
|   | Indemnification   |  |  |  |  |
| officials, its employees from and against any a death and/or property la Facility(ies), including Municipality, either into any person or person on account of, any of tany negligence or alleg of the public, or through | save harmless and defend the <b>Munici</b> s, agents, volunteers and others working all claims, losses, costs, attorney's loss, expense claims or demands arising all suits or actions of every kind or a dividually or jointly with <b>User</b> for or an or property, caused or occasioned the activities conducted by or caused the activities conducted by or caused the activities are in safeguarding the <b>Fa</b> and act, omission or fault or allege volunteers, subcontractors or others unship with the <b>User</b> . | ng on behalf of the <b>Municipality</b> , is fees, damages, or injury including ing out of <b>User's</b> use of the named description brought against the on account of any damage or injury or alleged to have been caused by, or to be conducted by <b>User</b> , or through acility(ies), participants, or member d act, omission or fault of the <b>User</b> , |  |  |  |
| Signature   | Print Name  | Date   |  |  |  |



| DATE:  | _   |
|--|---|
| TO: SHERRY MASON, BOROUGH CLERK                          |   |
| I REQUEST TO BE REIMBURSED FOR THE FOLL                  | .OWING:   |
|  | equesting the return of their posted park bond within 30 days |
| of the close of the calendar year in which the event was | s held.   |
| ☐ CURB & SIDEWALK BOND                                   | □ DUMPSTER BOND   |
| ☐ MAINTENANCE BOND                                       | □ PERFORMANCE BOND  |
| □ PILING BOND  | □ STREET BOND   |
| ☐ ESCROW (LAND USE BOARD)                                | □ Park Bond Event   |
| □ Other:   |   |
| NAME:  | PHONE #:  |
| DD ODEDTW A DD DEGG                                      | DI OCIVA OTT  |
| PROPERTY ADDRESS:  | BLOCK/LOT:  |
| CHECK MADE PAYABLE TO:                                   |   |
| ADDRESS:   |   |
| AMOUNT TO BE REIMBURSED:                                 |   |
| I UNDERSTAND ALL REIMBURSEMENTS MUST<br>BE ISSUED.       | BE APPROVED BY COUNCIL BEFORE A CHECK MAY                     |
| SIGNATURE:   | <br>ough Use Only******************************               |
|  | DATE:   |
| BOROUGH ENGINEER:  | DATE:   |
| CLERK/COUNCIL:   | DATE:   |
| CHIEF FINANCIAL OFFICER:                                 | DATE:   |

RESOLUTION #: \_\_\_\_\_